Under the Paperson, Reduction Act of 1995, no persons are required to respond PATENT APPLICATION FEE DETERMINATION	Appended U.S. Patent and Trademics, Office colors of information o	a me nacagi ce. U.S. DEF	FTO 35 3 (0) 30 h 7/3 (0090, 0148 (05) -033 PARTMENT OF COMMISSION
Substitute for Form PTO-875	N RECORD	Soli displays Apply sepur	a valid Otall control front of the Joseph Charles of the Joseph Ch
CLAIMS AS FILED - PART I (Column 1) (Column 2)	Cuert Hint		CHERTHAN Charter

Children	. 10	175335	+
CLAIMS AS FILED - PART I			•
(Column 1) (Column 2) (Alfeld 1911) (1)		THE PER	•:
17.5 Minuscolonia	1	1 MAC 1 19.7.7	:
BASIC FEE GUARDER FRED FOUNDER LADA FAIE FAI		RATE OF	
TOTAL CLARGE	·	10011	EL .
(37 CFR 1.16(c))	cu:	:	
##96PBF9EHFCLARAS .X \$ = .X \$ = .X \$ =	Of.	X 5 = -	
ninus 3 =			·
ARRETIME DEPENDENT CLARAPRESENT (37 CFR J. 1500)	QD:	X \$ =	
	· [
U. the difference in column this less than zero, unfor "C" in column ?	OR	+ 5	
	Ci-	Total	· ·
CLAIMS AS AMENDED - PART II			 -
117.32.56			- 1
(Column 2) (Column 3)	•1	OBSERTAGE	
GLAIGS HISTORY		SEMIL ERROR	- 1
AFTER PROPERTY PROBLEM RATE ALCOHOL	1	0.11	
EXTRA AMENDMENT PART FOR EXTRA	- 1	PATE ALL.	
[O] (Notes Figure 14) Minute (12) 20 = 111	ļ	iir	- 1
U Granting 13 linus		:	
30 30			
FIRST PRESENTATION OF MALIPPEL DEPTHEND CLASS (37 CFP) 1600	"	:	
1 5 =	Q#-		
TOTAL	. 10	TAL	\dashv
		יסיו דבר	
CLANAS (Column 2) (Column 3)			\neg
REMAINING REMAINING NUMBER PRESENT RATE APPLIA			
HATE ADDI- AMENDMENT PAUD FOR UNIVAL		RATE ADD.	
REMAINING AFTER AFTER AMENDMENT PREVIOUSLY EXTRA PREVIOUSLY PAID FOR STRA PREVIOUSLY EXTRA PREVIOUSLY EX	- 1	HORAL	
Z Independent			
	R X S	=	_1
FIRST PRESENTATION OF MALES	R . Xs	. =	7
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) . + 5 = O			-
J. (+ § = OF		· =	ŀ
ADD'L FEE	,TOT,	AL 'L FEE'	7
(Column 1) (Column 2) . (Column 2)	7.00		-{
CLAIMS . WICHEST T	: .		1
AFTER PRESENT RATE ADDITION		A.T.C.	1
Total PAID FOR . I HONAL .	1 : 10	ADDI- TIONAL	1 .
O (37 CFR 1 16(c)) . Minus	ļ	FEE] :
Z	x s	=	1
\$\frac{1}{5\langle \text{Posts}} \tag{\text{No.} \text{S. 5.}} \tag{\text{S. 5.}}	.		1.
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)).	× \$	===	l · ·
OR OR	+ \$.: .
If the entry is not	TOTAL	=	
If the entry in column 1 is less than the entry in column 2, write 6 in column 3. OR If the Highest Number Reviously Paid For IN THIS SPACE :::	ADD'L		
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20" The "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20" The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20"	• .		
""yricst Number Proviously by the "" " " " OFACE IS less than 3 enter "a"			

f you need assistance in completing the form, call 1-800-PT,Q-9199 and select option 2

If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter 30.

The "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.